



Assisted Acquisition Services Approval Request

I. Requesting Agency:

Point of Contact Name / Phone:
 Point of Contact Email:
 Point of Contact Address:

II. Servicing Agency: NIH Information Technology Acquisition and Assessment Center

III. Requirement Title:

IV. Purpose and Scope:

The estimated total value of this contract is: \$ _____ with a _____ total POP.

Period 1	Period 2	Period 3	Period 4	Period 5	Totals
Months:	Months:	Months:	Months:	Months:	Months:
\$	\$	\$	\$	\$	\$

1. Has any market research been conducted? Yes No

a. Identify the type of market research that was conducted:

2. Which GWAC does the Requesting Agency anticipate using?

CIO-SP3 CIO-SP3 Small business CIO-CS Unknown

3. Is there an incumbent contractor currently providing these products or services?

Yes No If yes, who: _____, and when does it expire:

4. Identify the funding codes associated with the Requesting Agency. These codes ensure that the Requesting Agency receives credit for the award in FPDS-NG.

a. Program/Funding Agency Code (e.g.: 7529 NIH):

b. Program/Funding Office Code: (e.g.: 00316):

5. When are the proposed products/services desired?

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6. What is the desired contract type? Firm Fixed Price Time and Materials
 Labor Hour Cost Reimbursement Hybrid

V. Identify Current Procurement Office:

1. Is the Requesting Agency currently assigned to a Procurement Office (PO)?
 Yes No If Yes, what Procurement Office is the Requesting Agency currently assigned to?
2. Did the Requesting Agency approach their current Procurement Office about this work first? Yes No If no, Why?
3. Did the Requesting Agency's current Procurement Office decline the opportunity to complete the procurement? Yes, PO declined the opportunity No, PO did not decline the opportunity.

Why does the Requesting Agency want NITAAC to provide procurement services?
What exactly did the Requesting Agency's current Procurement Office say about their ability/inability to handle this work?

VI. Duties and Responsibilities:

1. **Acquisition Planning: *Determine needs and develop requirements document.***

a. **Requesting Agency:**

- i. Establish that a requirement exists.
- ii. Provide documentation to the Servicing Agency, which must be in the form of a Statement of Work (SOW), Statement of Objectives (SOO), Performance Work Statement (PWS), or a set of detailed specifications, that includes a specific, definite, and clear description of a bona fide need in the fiscal year that the funds are available for new obligations. The need must be adequately documented.
- iii. Initiate acquisition planning as soon as a need is identified and involve the Servicing Agency, as appropriate, in the planning process.

b. **Servicing Agency:**

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- i. Assist the Requesting Agency in refining the requirements document package, including the description of key project objectives, unique project requirements, and performance expectations.
- ii. Inform the Requesting Agency the number of Full Time Equivalent (FTEs) that will be devoted to the requirement. For the current procurement, it is estimated that 1 FTE will be assigned.

VII. Approval Request:

The NITAAC Assisted Acquisition Services Office is formally requesting approval to process this assisted acquisition under the NIH GWACs. If approved, an MOA will be established to outline the minimum levels of management duty and responsibility for the _____ office and NITAAC. The terms and conditions of this agreement become effective when signed by authorized officials of both agencies and will remain effective through the end of the contracts period of performance, unless amended or terminated.

<p>_____ Bridget Gauer Acting Assisted Acquisition Services Division Chief NIH Information Technology Acquisition and Assessment Center</p>	<p>_____ Date</p>
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Determination:

We, the undersigned hereby approve/disapprove the Assisted Acquisition Services request for:
_____.

Approved <input type="checkbox"/>	Disapproved <input type="checkbox"/>
<p>_____ Bridget Gauer Acting Program Director NIH Information Technology Acquisition and Assessment Center</p>	
Date	

Approved <input type="checkbox"/>	Disapproved <input type="checkbox"/>
<p>_____ Brian K. Goodger Associate Director NIH Office of Logistics & Acquisition Operations</p>	
Date	